File Original and First County		
Second Copy—Owner's Copy Third Copy—Driller's Copy Water Right Permit No.		
(1)	OWNER: Name DAUIS MARITZ	Address 24 W. N CAMANO B. CAMANOE
(2) (2a)	STREET ADDDRESS OF WELL (or nearest address) 31 W:	N CAMANO DE CAMANO IS, US
<u> </u>	PROPOSED USE: Domestic Industrial Municipal	(10) WELL LOG OF ABANDONMENT PROCEDURE DESCRIPTION
(3)	PROPOSED USE: Irrigation DeWater Test Well Other	Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated,
(4)	TYPE OF WORK: Owner's number of well (If more than one)	with at least one entry for each change of information. MATERIAL FROM TO
	Abandoned New well Method: Dug Bored Cable Driven Reconditioned Rotary Justed Services	SAND & GRAVER 0 8 HARD PAN 8 22
(5)	DIMENSIONS: Diameter of well inches. Drilled feet. Depth of completed well ft.	BIME CLAY 22 103 SANDY CLAY & GROVET 103 120 DOW SILT & GROVET 120 142
(6)	CONSTRUCTION DETAILS:	ENT SON A GENE 142 162
(0)	Casing installed Diam. from ft. to 150 ft.	gean SAND (FINE) 162 180
	Perforations: Yes No M	
	Type of perforation usedin. byin.	
	perforetions fromft. toft.	RECEIVED
	perforations fromft. toft.	JUN 1 9 1995
	Screens: Yes No No	
	Manufacturer's Name	DEPT. OF ECOLOGY
	Gravel packed: Yes No Size of gravel	
	Gravel placed fromft. toft.	
	Surface seal: Yes 1 1 To what depth?tt.	
	Material used in seal	
	Type of water?Depth of strata	
	Method of sealing strata off	
(7)	PUMP: Manufacturer's Name UU KDOESO	
	Type: H.P. H.P. H.P. H.P. H.P. H.P. H.P. H.P	
(B)	WATER LEVELS: Land-surface elevation above mean sea level Static level	
	Artesian pressureIbs. per square inch Date	1 1 200 1
	Artesian water is controlled by (Cap, valve, etc.))	Work started 5/27/, 19. Completed 5/27/, 19.25
(9)	WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? Yes No If yes, by whom? Yield: gal. / min. with ft. drawdown after hrs.	WELL CONSTRUCTOR CERTIFICATION:
_	H 0 0 0 0	Materials used and the information reported above are true to my best
_	Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level) Time Water Level Time Water Level Time Water Level	NAME ARTHURS WET DEILING COM
_		(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)
	Date of test	Address
	Baller test gal./min. with ft. drawdown after hrs.	(Signed) (WELL DRILLER) Contractor's
	Airtest gal./min. with stem eet at ft. for hrs.	Registration of Registration of WD 15 Page 5/27/1895
	Artesian flow g.p.m. Date Temperature of water Was a chemical analysis made? Yes No Wester	(USE ADDITIONAL SHEETS IF NECESSARY)
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